



**DC Update: NASADAD Publishes New SOR Thematic Brief on Opioid Post Overdose Response, Study Evaluates the Availability of MOUD in Opioid Treatment Programs, New PTCC Webinars, and More.**

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## NASADAD News

### **NASADAD Publishes Thematic Brief: State Opioid Response Grant Initiatives: Opioid Post Overdose Response: Strategies and Approaches**

NASADAD, with support from the Opioid Response Network (ORN), recently published a new thematic brief as part of its series of briefs on the impact of the State Targeted Response (STR) and State Opioid Response (SOR) Grants on State substance use systems on [State Opioid Response Grant \(SOR\) Initiatives: Opioid Post Overdose Response: Strategies and Approaches](#). The new brief builds upon [NASADAD's interactive map](#) that offers State and territorial-specific briefs highlighting each State's substance use agency's use of STR and SOR funds across the continuum and other thematic issue briefs that cover strategies for addressing common issues related to the use of those funds across States. Specifically, the brief highlights innovative strategies, lessons learned, and examples of State initiatives implemented using STR and SOR funding to address the needs of those who have experienced opioid overdose and are at heightened risk for a subsequent event. State examples featured in this brief include:

#### State Opioid Response (SOR) Grant Initiatives

Opioid Post Overdose Response: Strategies and Approaches

##### Introduction

The State Opioid Response (SOR) grant is administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) to provide resources to states and territories to address the opioid epidemic through the continuum of prevention, treatment, and recovery support services for opioid use disorder (OUD) and other substance use disorders. The SOR grant aims to support states in establishing a continuum of care for stimulant misuse and use disorders, including for cocaine and methamphetamine. The grant program aims to help reduce unmet treatment needs and opioid use.

This document describes initiatives that states have implemented with SOR funding to provide crisis and ongoing services to people after a nonfatal opioid overdose.

##### Purpose and Background

In 2023, 109,000 individuals died from a drug overdose death, resulting in an age-adjusted rate of 34.6 deaths per 100,000 standard population and continuing to position one of the leading causes of injury death in adults. While the overall age-adjusted rate of drug overdose deaths has declined, the number of nonfatal overdoses among people still experiencing crisis events. The vast majority of deaths, 79,358 in 2023, continue to result from opioids. Most opioid overdoses are nonfatal, but the exact percentage of nonfatal overdoses that result in death is not known due to incomplete availability. Studies estimate that 70-85% of opioid overdoses do not result in death, but that those who survive risk oxygen deprivation and a higher risk of future fatal overdoses (see Figure 1).<sup>1</sup>

One study found that 19.8% of participants who received repeated medical treatment for opioid use disorder also experienced a nonfatal overdose during the year following their first event. This study by the Centers for Medicare & Medicaid Services (CMS) found that among 13,720 Medicare beneficiaries experiencing a nonfatal overdose in 2020, almost 24,000 (17.4%) individuals experienced a repeat event, and 1,600 (11%) died from overdose in the following year. Another study found that of 4,680 individuals receiving treatment for opioid use disorder in 2018, 2,000 (43%) experienced an overdose in the year, but only 21.7% of those with repeat events received medication for opioid use disorder (MOUD) at any point.



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National Association of State Alcohol and Drug Agency Directors



State Opioid Response Network

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- Post-Overdose Support Teams (POST)
  - Massachusetts
- Opioid Overdose Dashboard
  - District of Columbia
- Recovery Coach and Peer Support Initiative (RCPSI)
  - Indiana
- First-responder Buprenorphine
  - Washington State

Additional thematic briefs on the use of STR and SOR funds in States can be found on the NASADAD public website, [here](#).

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## Voices on the Hill

### Senator Mitch McConnell, Senator for Kentucky

Senator Mitch McConnell (R-KY) serves as the senior Senator from Kentucky, a position he has held since 1985. During his tenure, Senator McConnell also served as the leader of the Senate Republican Conference from 2007 to 2025, including twice as minority leader (2007 to 2015; 2021 to 2025) and once as majority leader from 2015 to 2021. He is the longest-serving senator in both Kentucky history and the longest-serving Senate party leader in US history. Prior to his election to Congress, Senator McConnell was elected Jefferson County Judge/Executive, the top political office in Jefferson County, Kentucky, and, before that, he served as Deputy Assistant Attorney General and acting Assistant Attorney General for the Office of Legislative Affairs under President Ford. He began his career in the Army Reserve as a private in Louisville before entering government as chief legislative assistant to the late Senator Marlow Cook (R-KY). Senator McConnell earned a B.A. in political science from the University of Louisville and a J.D. from the University of Kentucky College of Law in 1967.



Senator McConnell has a long history of support for substance use disorder (SUD) policy, in particular on recovery, reentry, and community-based services. Specifically, as Senate Majority Leader, Senator McConnell was instrumental in securing bipartisan support for the passage of both the [Comprehensive Addiction and Recovery Act \(CARA\) of 2016 \(P.L. 114-196\)](#) and the [21st Century Cures Act \(P.L. 114-255\)](#), helping to secure over \$1 billion in funding to support States' efforts to address the opioid crisis. Senator McConnell also supported the [Opioid Crisis Response Act of 2018 \(S.2680\)](#), a bill to establish a series of programs around opioid use, including research and awareness campaigns, training for first responders, and treatment and recovery centers. Later, in 2018, Senator McConnell introduced the [CAREER Act \(S.2730\)](#), legislation to establish a pilot program within the Department of Housing and Urban Development (HUD) to connect people with SUD to recovery housing that was later included in the [SUPPORT for Patients and Communities Act \(P.L. 115-271\)](#). He followed that up by introducing the [CAREER Act of 2023 \(S.1991\)](#) and the [CAREER Act of 2025 \(S.500\)](#), both of which sought to reauthorize the Recovery Housing Program. More recently, Senator McConnell was again key in securing passage of the [SUPPORT for Patients and Communities Reauthorization Act of 2025 \(H.R.2483\)](#), a package to reauthorize programs authorized in the original SUPPORT Act through Fiscal Year (FY) 2030 that address the opioid crisis, overdose, and other SUD issues, including the Recovery Housing Program.

Senator McConnell currently serves on the Senate Appropriations Committee, which has jurisdiction over federal funding, and many of its subcommittees, including as Chairman of the Subcommittee on Defense. He also serves on the Senate Committee on Agriculture, Nutrition, and Forestry, including as Chairman of the Subcommittee on Food and Nutrition,

## Around the Agencies

### SAMHSA Awards \$98M in Funding Through the Hepatitis C Elimination Initiative Pilot

The Substance Abuse and Mental Health Services Administration (SAMHSA) awarded \$98 million to 19 State and community-based organizations through the [Hepatitis C Elimination Initiative Pilot](#). The Hepatitis C Elimination Initiative, announced in July 2025, is designed to help communities disproportionately affected by Hepatitis C, mental health and substance use disorder (SUD), and homelessness by providing grants to SUD providers to pair Hepatitis C prevention, testing, and treatment with the provision of mental health and SUD services to minimize the risk of Hepatitis C infection. Awards range from approximately \$2.5 million to \$7.5 million for a project period of up to two years.

SAMHSA's press release announcing the awards can be found [here](#).



### NCSACW Resource Series: Improving Early Childhood Outcomes and Systems for Families Affected by Parental Substance Use, Substance Use Disorders, and Co-Occurring Mental Health Disorders

The National Center on Substance Abuse and Child Welfare (NCSACW), with funding from the Administration for Children and Families (ACF) and the Substance Abuse and Mental Health Services Administration (SAMHSA), released a new resource series on [Improving Early Childhood Outcomes and Systems for Families Affected by Parental Substance Use, Substance Use Disorders, and Co-Occurring Mental Health Disorders](#).

The resource series is intended for child welfare systems, mental health and substance use disorder (SUD) providers, early childhood programs, and family-serving organizations, and seeks to strengthen organizations' capacity to coordinate services, share information, and implement effective services to improve outcomes in the early childhood period for families affected by SUD. Specifically, the series includes three fact sheets and a series of discussion questions, each with videos featuring subject matter experts, including parents in recovery from SUD. Resources in the series include:

- [Overview: Improving Early Childhood Outcomes and Systems for Families Affected by Parental Substance Use, Substance Use Disorders, and Co-Occurring Mental Health Disorders](#)
  - "Introduces the series and includes a brief video of a subject matter expert sharing her experiences as a parent of a child with special needs."
- [Fact Sheet 1: Early Childhood Practice and Policy for Child Welfare Agencies](#)
  - "Provides an overview of common challenges to meet the needs of families affected by substance use disorders (SUD) and who have young children. Included are practice and policy strategies for child welfare agencies to partner with early childhood service providers and other family-serving systems to improve outcomes for young children affected by parental SUD."
- [Fact Sheet 2: Family-Centered Approaches in Early Childhood for Substance Use Disorder \(SUD\) Treatment Programs](#)
  - "Provides an overview of how a family-centered approach can be used to improve outcomes for families affected by SUDs and who have young children. Also included are strategies based on a family-centered approach that SUD treatment programs can implement when working with families with young children."
- [Fact Sheet 3: Cross-System Collaborative Strategies for Early Childhood Service Providers](#)

- “Intends to help early childhood service providers to: 1) understand the needs of families affected by substance use; 2) identify children affected by prenatal substance exposure (PSE) or exposure to parental substance use; and 3) coordinate with community partners to meet the needs of children, parents, and family members.”
- [Action Guiding Questions to Strengthen Family-Centered Practice for Families with Children ages 1-6 and Affected by Parental Substance Use Disorders and Co-Occurring Mental Health Disorders](#)
  - “Includes four sets of discussion questions intended for family-serving systems to chart a course for action to implement and strengthen their family-centered approach to improve outcomes for families affected by substance use disorders (SUD) and who have young children.”

## CMS/Westat Resource: Evaluation of the Maternal Opioid Misuse (MOM) Model Fourth Annual Report



Westat, with funding from the Centers for Medicare & Medicaid Services' (CMS) Innovation Center, released the [Evaluation of the Maternal Opioid Misuse \(MOM\) Model Fourth Annual Report](#). The Report provides an overview of the MOM model, established in 2018 by CMS to address the opioid epidemic and improve maternal and infant health, as well as key results from implementation year three of the program. Specifically, the Report shares seven State profiles: Colorado, Indiana, Maine, New Hampshire, Tennessee, Texas, and West Virginia, each providing real-life examples of how State Medicaid agencies and their model partners use the MOM model, including strategies to support model adoption, data collection, and long-term sustainability.

CMS also released a “Findings at a Glance” document, which can be downloaded, [here](#).

Additional details on the MOM model can be found on CMS’ website, [here](#).

## SAMHSA’s #MyPreventionStory 2026 Social Media Campaign

Ahead of next year’s National Prevention Week, May 10-16, 2026, the Substance Abuse and Mental Health Services Administration (SAMHSA) is promoting [#MyPreventionStory](#), a year-round social media campaign dedicated to acknowledging people’s experiences with mental health and substance use disorder (SUD) prevention. Specifically, the social media campaign calls for individuals, organizations, and communities to create and share stories about their personal experiences with prevention on social media with the hashtag #MyPreventionStory. Then, during National Prevention Week, SAMHSA will highlight the social media posts as a critical part of the national conversation to celebrate prevention.

Additional details on how to participate in the #MyPreventionStory social media campaign can be found [here](#).

Other downloadable prevention activities from SAMHSA can be found [here](#).

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## Research Roundup

### Study Evaluates the Availability of Medications for Opioid Use Disorder in Opioid Treatment Programs

A group of university researchers published a study in JAMA Network Open on [Availability of Medications for Opioid Use Disorder in Opioid Treatment Programs](#). The study utilized data from the Mental Health and Addiction Treatment Tracking Repository (MATTR) from 2017 to 2023, which includes facilities that responded to the National Survey of Substance Abuse Treatment Services (N-SSATS) and the National Substance Use and Mental Health Services Survey (N-SUMHSS), on a panel of 10,298 opioid treatment programs (OTPs) across the US to evaluate the extent to which OTPs offer all three forms of Food and Drug

Administration (FDA)-approved medications for opioid use disorder (MOUD) (methadone, buprenorphine, and naltrexone). Specifically, the study found that the percentage of OTPs offering all three forms of FDA-approved MOUD increased from 33.2% (402 of 1,211) in 2017 to 45% (639 of 1,421) in 2023. Other key findings include:

- “In total, 8,109 of 10,298 OTPs (78.7%) offered buprenorphine, 4,702 (45.7%) offered naltrexone, and 3,985 (38.7%) offered all 3 MOUD.
- From 2017 to 2023, the percentage of OTPs offering MOUD beyond methadone also increased (buprenorphine: 811 [67.0%] in 2017 to 1209 [85.1%] in 2023; naltrexone: 463 [38.2%] in 2017 to 749 [52.7%] in 2023; with buprenorphine offered in more OTPs compared with naltrexone.
- OTPs accounted for 1,421 of all 11,471 substance use disorder treatment facilities (12.4%) in 2023, and the number of OTPs that offered all 3 MOUD in the same year was 639 (4.5%).
- OTPs offering all 3 MOUD (3985 [38.7%]) had significantly higher odds of accepting Medicare (adjusted odds ratio [AOR], 2.14; 95% CI, 1.67-2.74); offering peer services (AOR, 1.63; 95% CI, 1.25-2.12), mental health services (AOR, 2.07; 95% CI, 1.53-2.80), and telemedicine services (AOR, 1.53; 95% CI, 1.22-1.92); and being private nonprofit (AOR, 7.45; 95% CI, 4.67-11.87) or government operated (AOR, 41.83; 95% CI, 19.71-88.75) compared with private for profit.”

The study also compares demographic groups and county-specific characteristics of OTPs that provide more comprehensive medication offerings.

Despite the availability of MOUD increasing over time, the authors note that most OTPs do not offer all three forms of FDA-approved MOUD as of 2023, calling for future research to evaluate factors that prevent OTPs from offering comprehensive MOUD.

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## Webinars to Watch

### Central East PTTC Webinar: Adolescents, Substance Use, and Prevention: Trends and Reflections from Gateway Drugs to Overdoses



The Substance Abuse and Mental Health Services Administration (SAMHSA)-funded [Central East Prevention Technology Transfer Center \(PTTC\)](#) is hosting a webinar on [Adolescents, Substance Use, and Prevention: Trends and Reflections from Gateway Drugs to Overdoses](#). This no-cost webinar is on November 4, at 10:00 am ET. The webinar will review the latest research, trends, and neuroscience on the initiation of substance use, the development of substance use disorder (SUD), and the risks of overdose in adolescents. Specifically, the webinar seeks to synthesize concerns with neurobiological research to accurately illustrate the threats, impacts, and opportunities related to substance use among younger populations. Learning objectives include:

- “Describe the trajectory of substance use in the adolescent population since the beginning of research on this phenomenon.
- Explain how the history of substance use presenting in adolescents has impacted prevention and outreach methods historically and currently.
- Recite current expectations and considerations when intervening with adolescents who are using substance use.”

Certificates of attendance are available for participation in this webinar.

[Registration](#) is required.

## New England PTTC Webinar: Effective Supervision in Prevention: Skills, Tools, and Strategies

The Substance Abuse and Mental Health Services Administration (SAMHSA)-funded New England Prevention Technology Transfer Center (PTTC) is hosting a webinar on [Effective Supervision in Prevention: Skills, Tools, and Strategies](#). This no-cost interactive webinar is on November 6, at 9:00 am ET. The webinar is intended for intermediate to advanced prevention professionals and is designed to equip prevention leaders with the skills and tools to be effective supervisors. Specifically, the webinar will review practical strategies and real-life examples of effective supervision in prevention to provide a clear framework for managing, tracking, and enhancing supervision efforts. Learning objectives include:

- “Identify the IC&RC prevention domains and their role in effective supervision.
- Develop key supervisory skills to support and mentor new prevention professionals.
- Utilize practical tools for managing, tracking, and enhancing supervision efforts.”

Certificates of completion are available for participation in this webinar.

[Registration](#) is required.

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